PTO/SB/06 (05-03)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number			
CLAIMS AS FILED – PART I (Column 1) (Column 2)							SMALL	FNTITY	OR		/ R THAN . ENTITY	
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FOR BASIC FEE		NUMBER FILED		NUMBER EXTRA			RATE	FEE	١.	RATE	FEE	
(37	CFR 1.16(a)) TAL CLAIMS							s	OR		\$	
(37	CFR 1.16(c))	mle	nus 20 =	•			x \$=		OR	x \$=	· ·	
	EPENDENT CLAIMS CFR 1.16(b))	mla	nus 20 =	• *			x \$=		OR	x \$=]
MU	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+\$:=		OŖ	+ \$		
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ĺ	CLAI	MS AS AMEND	ED P/	ART II		é.]
	(Column 1)	((Column 2)	(Column 3)	_	SMALL I	ENTITY	OR ·	_	R THAN ENTITY	;
ENDMENT A		CLAIMS REMAINING AFTER MENDMENT	N PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
M	Total * (37 CFR 1.16(c))	/3 Min	us **	29	=		x \$=		OR	x s=		1
JEN	Independent (37 CFR 1.16(b))	3 Min	us ***	5	e		x s=		OR	X \$=		
AM	FIRST PRESENTATION	ON OF MULTIPLE DEPI	ENDENT CL	.AIM (37 CF	R 1.16(d))		+s =		ÓR	+s =		
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ENT B	F	CLAIMS REMAINING AFTER MENDMENT	HI N PRE PA	IGHEST UMBER EVICUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	ingene Toping We intiger
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7	FIRST PRESENTATIO	N OF MULTIPLE DEPE	NDENT CL	AIM (37 CF	R 1.16(d))		= 2+ LATOT		OR :	+ s= TOTAL		
	, • William ====================================	o 4 in lane the - #			o *0* in!	2	ADD'L FEE		OR	ADD'L FEE	L	
•	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".											

*** If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD 160067 Effective December 29, 1999 **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN (Column 1) (Column 2) TYPE (3) **SMALL ENTITY** OR NUMBER EXTRA **FOR NUMBER FILED** RATE FEE RATE FEE Addition to the second of the second of the second **BASIC FEE** 345.00 690.00 OR minus 20= **TOTAL CLAIMS** JО X\$ 9= X\$18=OR INDEPENDENT CLAIMS minus 3 =X39= X78= OR MULTIPLE DEPENDENT CLAIM PRESENT +130= +260= OR If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL **TOTAL** OR **CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY SMALL ENTITY** OR · (Column 3) (Column 1) (Column 2) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER PRESENT **RATE** TIONAL **RATE** TIONAL **PREVIOUSLY AFTER AMENDMENT EXTRA** FEE FEE **AMENDMENT** PAID FOR Total Minus X\$ 9= X\$18=OR Independent Minus X29= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130 =OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) HIGHEST CLAIMS ADDI-ADDI-**REMAINING** NUMBER **PRESENT** TIONAL TIONAL RATE RATE **AMENDMENT AFTER PREVIOUSLY EXTRA AMENDMENT** PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus X39 =X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +26Ø= +130= OR TOTAL OR ADDIT, FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT** RATE TIONAL RATE TIONAL **PREVIOUSLY** MENDMENT **AFTER EXTRA AMENDMENT** PAID FOR **FEE FEE** Total Minus X\$184 X\$ 9= OR Independent Minus X/78= X39 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number ...